

DAVID G. REICHERT
8TH DISTRICT, WASHINGTON

COMMITTEE ON WAYS AND MEANS
SUBCOMMITTEE ON TRADE
SUBCOMMITTEE ON OVERSIGHT
SUBCOMMITTEE ON SOCIAL SECURITY



Congress of the United States
House of Representatives
Washington, DC 20515-4708

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April 3, 2009

The Honorable David Obey, Chairman
Committee on Appropriations
H-218, The Capitol
Washington, DC 20515

The Honorable Jerry Lewis, Ranking Member
Committee on Appropriations
H-218, The Capitol
Washington, DC 20515

Dear Chairman Obey and Ranking Member Lewis:

I am requesting funding in the FY 2010 Commerce, Justice, Science Appropriations bill, Department of Justice, Community Oriented Policing Services (COPS) Meth account for the Washington State Methamphetamine Initiative (WSMI). The entity to receive funding for this project is the Pierce County Alliance, 510 Tacoma Ave S, Tacoma, Washington 98402. It is my understanding that the funding would be used to improve enforcement, abate production of methamphetamine, and provide prevention, treatment, and the necessary resources to mobilize communities state-wide. The WSMI program propagated an effective treatment model to deal with the severity of the drug and created "Meth Action Teams" (MATs) in every county, educating and organizing communities to combat the drug and all its related effects at the grassroots. I certify that this project does not have a direct and foreseeable effect on the pecuniary interests of my spouse or me.

I hereby certify that this request will be made publicly available on my official congressional website as required by Chairman Obey's new Committee policy that only posted requests will be considered.

Consistent with the Republican Conference's policy on project requests, I hereby certify that to the best of my knowledge this request: (1) is not directed to an entity or program that will be named after a sitting Member of Congress; (2) is not intended to be used by an entity to secure funds for other entities unless the use of funding is consistent with the specified purpose of the earmark; and (3) meets or exceeds all statutory requirements for matching funds where applicable. I further certify that should this request be included in the bill, I will place a statement in the Congressional Record describing how the funds will be spent and justifying the use of federal taxpayer funds.

Sincerely,


DAVE REICHERT
Member of Congress



OFFICE OF CONGRESSMAN DAVE REICHERT (WA-08)

PROJECT REQUEST CERTIFICATION

By submitting this request for federal funding, I certify that:

- This project directly benefits the residents of Washington's Eighth Congressional District and merits federal funding assistance.
- None of the funds requested will be used for a new building, program, or project named after a sitting Member of Congress.
- None of the funds requested will be used to secure funds for other entities unless the use of funding is consistent with the specified purpose of the project request.
- For requests where the receiving entity is not a unit of federal, state, or local government, or where the entity receiving the funding will not be providing support to a federal, state, or local government, or will not be providing research, the organization will provide matching funds, including in-kind contributions of 5% or more above the statutory requirement.
- For requests from non-federal, -state, or -local government entities or other public institutions, the organization will submit an End User Letter(s) of Support from a public official representing the direct beneficiaries of the project. This will be inserted into the Congressional Record and disclosed on the Member's Congressional Website.
- Under separate cover, I agree to provide a comprehensive plan outlining the sources of funding for the duration of the project; the percent and source of required matching funds, anticipated sources of the funding for the duration of the project, and a detailed budget for how federal funding assistance will be used to support the project.
- In the interest of transparency, any information submitted with this project request may be disclosed for public review, including but not limited to the Committee or Member's Congressional Website and the Congressional Record.
- Should the project receive federal funding, I agree to disclose whether I hired a lobby firm; if so, the name of the lobby firm; and how much was paid to advocate for this project.

PROJECT NAME: Washington State Methamphetamine Initiative (WSMI)

NAME OF PERSON CERTIFYING: Terree Schmidt-Whelan, Ph.D.

TITLE OF PERSON CERTIFYING: Executive Director

LEGAL NAME OF ENTITY MAKING REQUEST: Pierce County Alliance

LEGAL ADDRESS OF ENTITY MAKING REQUEST: 510 Tacoma Ave. So., Tacoma, WA
98402

SIGNATURE:

DATE:

3/27/2009

**OFFICE OF CONGRESSMAN DAVE REICHERT (WA-08)****CONGRESSIONAL SITE VISIT CERTIFICATION**

In the interests of accountability and transparency, we require that either the Congressman or a member of the Congressman's professional staff visit each project site requesting federal funding. This will enable our office to more thoroughly assess the merits of each project and ensure that limited taxpayer funds are invested wisely.

Upon completion of the congressional site visit, please complete this form and have a representative from the organization (not a representative from a lobbying firm) sign it. The Congressional Staff Member visiting the site will be responsible for collecting the form at the time of the visit.

I hereby certify that on April 1, 2009 Congressman Dave Reichert/a professional staff member from Congressman Dave Reichert's office visited our organization/project for the purposes of reviewing our request for federal funding.

PROJECT NAME: Washington State Meth Initiative

DATE OF CONGRESSIONAL VISIT: April 1, 2009

NAME OF PERSON CERTIFYING: Terrell Schmidt-Melton

TITLE OF PERSON CERTIFYING: Exec. Dir.

LEGAL NAME OF ENTITY MAKING REQUEST: Yerpe County Alliance

LEGAL ADDRESS OF ENTITY MAKING REQUEST: 570 Tacoma Ave.

SIGNATURE: [Signature] DATE: 4/1/09

MEMBER/CONGRESSIONAL STAFF MEMBER: Gwen Fraser

SIGNATURE: [Signature] DATE: 4/1/09

WASHINGTON ASSOCIATION OF SHERIFFS & POLICE CHIEFS

3060 Willamette Dr NE Lacey, WA 98516 PHONE (360) 486-2380 FAX (360) 486-2381 WEBSITE -- www.waspc.org

Serving the Law Enforcement Community & the Citizens of Washington



March 25, 2009

The Honorable Dave Reichert
Representative, State of Washington
1730 Longworth Building
Washington, DC 20515
Fax: (202) 225-4282

Dear Representative Reichert:

Subject: Appropriations Request—Washington State Methamphetamine Initiative

The federal appropriations funding of Washington State Methamphetamine Initiative has supported a coordinated and community-based program designed to address the battle against methamphetamine at the grass-roots level. One half of the funding has gone for law enforcement efforts, to include the addition of detectives in targeted areas to pro-actively investigate methamphetamine related cases with special attention to precursor chemicals. The law enforcement effort has also been bolstered with added intelligence gathering capacity and an expansion of the Washington State Patrol crime laboratory. The other half of the funding has been oriented to community organization, development of Methamphetamine Action Teams (MATs) in every county, prevention and treatment efforts, and the development of a protocol for the handling of drug endangered children. These program efforts have supported the Community Oriented Policing policies and objectives. The programs also integrate law enforcement and community-based efforts to comprehensively combat the multi-faceted impacts of our methamphetamine epidemic.

The Washington Association of Sheriffs and Police Chiefs urges you to favorably consider the appropriations request submitted by the Pierce County Alliance.

Sincerely,

A handwritten signature in dark ink, appearing to read "Donald G. Pierce".

Donald G. Pierce
Executive Director

President COLLEEN WILSON <i>Chief - Port of Seattle</i>	President Elect JOHN DIDION <i>Sheriff - Pacific County</i>	Vice President SCOTT SMITH <i>Chief - Tulalip</i>	Past President RICHARD LATHIM <i>Sheriff - Franklin County</i>	Treasurer BRUCE BJORK <i>Chief - WA Fish & Wildlife</i>
Executive Board				
ED HOLMES <i>Chief - Mercer Island</i>	TOM SCHLICKE <i>Chief - Snohomish</i>	MIKE KLINE <i>Marshal - U.S. Marshals, ED-WA</i>	JOHN BATISTE <i>Chief - WA State Patrol</i>	SAMUEL GRANATO <i>Chief - Yakima</i>
MIKE HUMPHREYS <i>Sheriff - Walla Walla County</i>	MIKE HARUM <i>Sheriff - Chelan County</i>	SUE RAHR <i>Sheriff - King County</i>	LAURA LAUGHLIN <i>SAC - FBI, Seattle</i>	DONALD PIERCE <i>Executive Director</i>

Finance Plan

This finance plan reflects a continuation of federal funding for the Washington State Methamphetamine Initiative (WSMI), initiated in 2000 with the help of Representative Reichert. The funds are allocated as indicted below and the 2010 funding request will continue the current positions and activities of the Initiative.

<u>Budget Item</u>	<u>Federal</u>	<u>County</u>
Law Enforcement	961,000	
Prevention	300,000	
Treatment	460,544	228,320
Indirect Costs	<u>278,456</u>	<u> </u>
Total	2,000,000	228,320

FY2010 APPROPRIATIONS REQUEST FORM

REPRESENTATIVE DAVE REICHERT (WA-08)

(ONE project/program per form)

GENERAL INFORMATION

Organization making request: **Pierce County Alliance** Federal Tax Status: **501(c)3 Private Non-profit**

Address: **510 Tacoma, Ave. So.**

City: **Tacoma** State: **WA** ZIP Code: **98402**

Point of Contact(POC): **Terree Schmidt-Whelan, Ph.D., Executive Director**

Phone: **253-572-4750** Email: **drterree@p-c-a.org**

Address: **510 Tacoma Ave. So.**

City: **Tacoma** State: **WA** ZIP Code: **98402**

DC Representation (if any): **n/a**

Phone: Email:

Address:

City: State: ZIP Code:

PROJECT/PROGRAM INFORMATION

PROJECT TITLE: **Washington State Methamphetamine Initiative (WSMI)**

Prioritized: 1 of 1 total requests for your organization

Appropriations Bill: (Please check)

☐ Agriculture
 ☒ Commerce, Justice, Science
 ☐ Defense
☐ Energy and Water
 ☐ Interior and Environment
☐ State, Foreign Operations
 ☐ Labor, Health and Human Services, and Education
☐ Military Construction, Veterans' Administration
 ☐ Homeland Security
☐ Transportation, Housing and Urban Development
 ☐ Financial Services
☐ Legislative Branch

Agency/Bureau (i.e. FBI; Corps of Engineers; US Navy; ARS, etc.): **DOJ**

Account (i.e. Buildings and Facilities, Aviation Safety; Capital Improvements, etc): **COPS Office**

Amount requested for FY2010: \$2,000,000

Total cost of project: \$3,645,000

Minimum amount of FY2010 funding needed to begin or sustain this project: \$2,000,000

Is this program authorized? ☐ YES ☒ NO If YES, bill number: Year:

Is this program funded in the President's FY10 budget request? ☐ YES ☒ NO If YES, amount: \$

Anticipated total future requests: \$10M Over the next 5 years

Local, state and/or private funding sources: Pierce County - \$228,580 (FY09)

Total Amount: \$ 457,160 Over the next 2 years

Other sources of Federal funding: HHS

Total Amount: \$ 1,162,500 Over the next 2 years

Federal Agency Sponsor or Program Manager: n/a

Office:

Phone Number:

Other agency advocate (if any):

Office:

Phone Number:

FY2010 APPROPRIATIONS REQUEST FORM

REPRESENTATIVE DAVE REICHERT (WA-08)

(ONE project/program per form)

Are you requesting this through any other office(s): Yes ☐ If yes, which office(s): Sen. Murray, Sen. Cantwell, Rep. Larsen

PROJECT FUNDING HISTORY (FROM CURRENT YEAR BACKWARD)

FISCAL YEAR	PRESIDENT'S REQUEST	ORGANIZATION'S REQUEST	FUNDING AMOUNT	APPROPRIATIONS BILL	ACCOUNT, SUBACCOUNT
FY09		2,000,000	Not passed	Omnibus Bill	DOJ/COPS
FY08		2,000,000	1,402,950	Fed Budget Bill	"Meth Hot Spots"
FY07		2,000,000	n/a	n/a	
FY06		2,000,000	1,974,456	Fed Budget Bill	"Meth Hot Spots"
FY05		2,000,000	1,973,286	Fed Budget Bill	"Meth Hot Spots"

Executive Summary/Project Description (MAXIMUM 200 Words):

- Please include a discussion of the project's merits, relevance, eligibility, and why it is a valuable use of taxpayer funds.
- Please limit your description to 200 words.
- You may attach additional information, however, please understand that the description provided below will be used for any and all public disclosure requirements.

The burgeoning growth of methamphetamine in Washington State has had a pervasive effect on the individual user, families, and communities across the state and its residue severely impacted the environment and real property. The epidemic mandated an intensive, proactive approach to address the problem on every level, prompting the organization of the Washington State Methamphetamine Initiative in 1999. A coalition of concerned, public and private entities developed a comprehensive, integrated program incorporating a focused treatment component, community mobilization and prevention, and environmental and property damage remediation.

WSMI's main goals are to improve enforcement, abate production of methamphetamine, and provide prevention, treatment, and the necessary resources to mobilize communities state-wide. The program propagated an effective treatment model to deal with the severity of the drug and created "Meth Action Teams" (MATs) in every county, educating and organizing communities to combat the drug and all its related effects at the grassroots. Having effectively launched the program in 2001, WSMI seeks to continue to meet the compelling threat of methamphetamine in our state by pursuit of a proven, cost-effective strategy that has reduced the number of illicit meth labs and dump site discoveries by over 70%.

Justification of funding:

- How does this request fit within the identified bill and account (cite specific precedents and overall purpose of account)?
- How many jobs could this project create and how will it benefit Washington's 8th Congressional District?

This request is an ideal implementation of the COPS "Meth Hot Spots" funding because it directly targets the multi-facets impacts of methamphetamine on our communities state-wide. The funding will also be critical to the retention of jobs related to the proactive investigation efforts related to methamphetamine trafficking across the state.

Specific language proposed for Congressman's request to the subcommittee (if any):

The committee is urged to provide this funding critical to the continuation of a very successful, model program that has made a real impact on illicit meth operations in Washington state. Funding is also crucial to address new threats, including growing meth trafficking from Canada and a dramatic increase in crystal meth through Mexican cartels.



A SUCCESS STORY:

Washington State Methamphetamine Initiative

Terree Schmidt-Whelan, Ph.D.
Co-Executive Director
drterree@p-c-a.org

Priscilla Lisicich, Ph.D.
Co-Executive Director
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510 Tacoma Avenue South – Tacoma, WA 98402
(253) 572-4750 – (253) 272-6788 fax

Executive Summary

Over the last several years, local, state and federal authorities became painfully aware of an epidemic growth in methamphetamine production, distribution, and use throughout Washington State. Its explosive, negative impacts on the environment and the health and safety of individuals and families rapidly generated untenable demands on the resources of local and state agencies.

The multifaceted threat mandated an intensive and proactive approach to address the problem on every level. The Washington State Methamphetamine Initiative was organized in 1999 by a coalition of concerned, public and private entities to create a comprehensive, integrated program to undertake a multi-disciplinary approach, entailing law enforcement, intelligence, forensics, professional training, environmental and health services, community mobilization and specific social intervention and education components.

The original stakeholders from enforcement, treatment, community mobilization, health and ecology worked with Washington State's governor's office to establish a Governor's Methamphetamine Coordinating Committee. Together, they brought together all concerned state and local agencies and governmental entities as well as private, nonprofit and commercial activities where appropriate. The project's main goals continue to be: 1) improve enforcement efforts utilizing community policing strategies; 2) abate the illicit production of methamphetamine; 3) provide prevention, treatment, and training resources; and 4) mobilize communities across the state in an organized way.

There are strong indications that these combined efforts are reaping important benefits. As of the end of 2007, Washington State realized an 88% reduction in illicit laboratories and dump sites, dropping the state from number two to number six nationally in methamphetamine production. Demand for the drug remains high, however, due to the increase of crystal methamphetamine by the Mexican cartel. The initiative continues to respond aggressively through its comprehensive, interdisciplinary approach. This includes the pursuit of innovative strategies to reduce demand, promote treatment and recovery, and interdict international crystal meth trafficking from foreign sources.

The program's overall success can be attributed to the combination of targeted public policy improvements and the collaboration of key stakeholders, governmental and private agencies and the citizenry.

I. The Warning Signs

As the decade of the 90's waned, authorities in Pierce County, Washington, became painfully aware of a burgeoning problem with methamphetamine, an epidemic drug problem unlike any they had previously experienced.

Law enforcement intelligence sources confirmed the northern migration of methamphetamine from Mexican National criminal organizations. The I-5 corridor served as a conduit for illicit drug trafficking across the Western states of California, Oregon, and Washington, stretching from Mexico to Canada. Pierce County, Washington, sitting astride I-5, is not only close to major population centers, it's vast expanse of rural and remote forested areas provide excellent locations for clandestine methamphetamine laboratories to operate with little chance of detection.

Regional and local data presented a startling picture of rampant growth that threatened to rapidly overtake state and community resources available to deal with the problem. The initial signs of a crisis arose from an escalating number of reports of clandestine meth labs, either actual labs themselves or "dump sites" where manufacturers had discarded residue, often on public property. By 1998, Pierce County, with 129 clandestine labs reported, had experienced over a twelve-fold increase since 1990. The following year, the number more than doubled with 329 labs reported. By the end of 2001, the state-wide total of 1,449 represented a 30-fold increase over the previous decade. But with over 40% of Washington's lab or dump site discoveries, Pierce County became known as the "meth capital" of the state.

Other warning signs included a 912% increase in the number of persons admitted to drug treatment who reported meth as their primary drug of choice. The Drug Abuse Warning Network (DAWN) indicated a near 8 times increase in the number of "methamphetamine mentions" for emergency room admissions from 1990 to 1997 in Washington's most populous tri-county area, composed of King, Pierce and Snohomish counties compared to increases of 119% for cocaine and 234% for heroin.

The huge growth in the popularity of meth that stretched across the nation was due to a number of factors. As production processes evolved, even novices could produce high quality methamphetamine with simple equipment, making the drug readily available and competitive in price to other drugs such as cocaine and heroin. The chemicals involved could be purchased over the counter for legitimate uses and have generally been readily available in supermarkets, home centers, hardware and farm supplies outlets, and therefore difficult to control. For example, anhydrous ammonia, key to the methamphetamine manufacturing process, is used in large quantities as fertilizer, blue-printing processes, and refrigeration.

Because of its characteristics, methamphetamine is an extremely attractive drug to a wide range of users. It was actually used by U.S., German, and Japanese armed forces during WWII to overcome fatigue and increase the aggressiveness, endurance, and performance of combat personnel. In the post-war years, it became popular with truck drivers and students who used it to overcome fatigue and maintain alertness. It was often prescribed by doctors for patients who were fighting obesity, because it reduced the appetite while increasing energy levels. Those who took more concentrated doses of meth, discovered that it produced an incredible "high" which lasted for several hours as compared to cocaine or heroin where a "hit" only lasts a few minutes.

It is therefore no real surprise that meth has very rapidly become the drug of choice for a growing number of abusers. Quite simply, it provides "more bang for the buck."

The other side of the coin from its "desired" effects, is an extraordinarily high addictiveness factor driven by severe withdrawal effects and post-usage dysphoria. Once hooked, users develop a very strong craving for the drug, although they are also known to use cocaine, heroin, or other drugs to dampen the withdrawal effects. Research indicates that over 90% of those who use methamphetamine become addicted. This compares with an addiction rate of 14% for those who inject heroin and 8% of those who smoke marijuana.

The mood and personality altering effects of methamphetamine include paranoia, irritability and delusional states that often drive irrational, sexual, criminal and violent acts. Thus, there is a strong correlation with methamphetamine use and incidents of domestic violence, assault, theft, burglary, fraud, child abuse and neglect, and the propagation of HIV/AIDS and other STDs.

The potency and effect on users, combined with its ease of production and relative low cost, renders methamphetamine the ultimate "nightmare drug". Besides supporting existing drug cartels and local "entrepreneurs", the associated chemicals and waste products have posed significant environmental hazards and health threats to an unwary public.

Like no other drug, methamphetamine impacts the health and safety of the state's citizenry, affecting individuals, families, the environment and broader community, as well as state and local agencies across the board. As General Barry MacCaffery, President Clinton's "drug czar" said in a 1999 visit to Pierce County, "Methamphetamine is the worst drug in America's history. It is ferociously addictive and it will be far worse than cocaine ever was."

II. Raising the Alarm

In late 1999, a retired Washington State Patrol officer, through his work with the Washington Association of Narcotics Officers, became fully aware of the implications of the methamphetamine epidemic facing the state. While the immediate impacts fell upon the law enforcement community, it was also very apparent that methamphetamine presented a very unique problem compared to other drugs, in that it impacted so many other aspects of the community. Furthermore, it was clear that as the epidemic spread, it threatened to outstrip the state and local resources needed to deal with it.

The officer brought together officials from the Pierce County Sheriff's office, the Washington State Patrol, the treatment community, and a community mobilization expert to discuss the crisis of methamphetamine and how they might organize to develop a strategy to deal with the problem.

This ad hoc organizing group recognized that the primary challenge was to communicate the problem to policy makers as well as to the broader community because the comprehensive impacts of methamphetamine, with its severity and potential long-term costs were, as yet, wholly unappreciated. The general perception that needed to be overcome was that methamphetamine was another drug of choice. In fact, its far-reaching environmental, property, personal and community safety impacts, were devastating.

The group agreed the first order of business was to identify the sectors that were impacted and to bring in professionals from those areas to help describe the relative costs of the impact of methamphetamine within the respective areas. That would, in turn, provide the basis on which to develop a comprehensive state-wide strategy.

Besides the correlation with criminal activity, the group identified other direct and indirect impacts on the community related to the manufacture, distribution, and use of methamphetamine.

The nature of the manufacturing process entails the use of caustic and toxic chemicals and, in the course of manufacture, highly flammable or even explosive mixtures are involved. In the hands of persons often impaired by their own drug use, the obvious dangers are even further escalated. The homes or other buildings where the manufacturing process takes place are invariably contaminated and have to be condemned by the health department because of the health hazard they present.

In the past, the complex manufacturing process produced a very prolific stench, and meth cooks would seek remote locations to avoid detection, often in the most rural counties of the state. There the costs of the enterprises are even more grievous because these counties are too often understaffed, under equipped, and under trained to deal with the effects of meth lab and dump sites.

With the advent of the so-called "Nazi" method, cooks have been able to produce high quality meth in a much simpler manner without the giveaway smells of the old processes. This has driven a trend of movement into urban areas to occupy homes, storage facilities, and even motels and apartments, thereby putting many other innocent persons at risk due to potential fires and contamination.

When such sites are discovered, the hazardous materials must be removed by specially trained Department of Ecology hazardous materials (Hazmat) teams, often under the watch of local fire department personnel, due to the flammability danger. This, of course, represents significant costs to these departments. In addition, the owner of the property must often face extensive costs to restore the living space to habitable conditions, often requiring the replacement of furniture, draperies, floor and wall coverings, as well as extraordinary and expensive clean-up by contractors specializing in such work. Where remediation is not immediately accomplished, many such homes stand empty and boarded up, becoming an eyesore in the neighborhood and reducing the property values of other homes in the area.

The chemicals and waste materials are often discharged into the plumbing, causing internal destruction to those systems within the building, as well as introducing severe pollution problems into the community's wastewater system.

The detritus of the manufacturing process presents additional problems and costs. For every pound of meth produced, some seven pounds of hazardous, toxic waste is also generated. The "cooks" will often dump these by-products wherever convenient to them, in wells, creeks, culverts, public forests or campsites and trailheads. Besides the obvious pollutant effects, these materials are particularly dangerous to the public, especially curious and unwary kids who may discover dump sites. When discovered, it requires the involvement of a hazmat team from the Department of Ecology to remove and safely dispose of the materials as well as deal with any contamination at the dump site.

Between 1994 and 1999, the number of residences declared unfit for habitation because of prior methamphetamine lab activity increased from 18 to 220 in Pierce County, an increase of over 1100%. Concurrently, costs for cleaning up residential laboratories increased from approximately \$450,000 to \$5.5 million over the same period.

And yet the costs imposed with regard to law enforcement, ecology and health services, as well as property damage and contamination, are only part of the equation. Other indirect, but long-term, costs are imposed by virtue of severe drug dependency, drug endangered children, and the impact on families.

Impacts to Families and Children

One of the sad facts of methamphetamine production is that in 1 in 3 cases, it is undertaken in locations occupied by families with children. These children are virtually unprotected from the chemical hazards present and the nature of the illegal activities means that firearms are also frequently present, creating additional hazards.

The caregivers, often addicted drug users themselves, are far more focused on the production of their drugs than the welfare of their children. If they are using meth, they are impacted by the psychotic effects that include a heightened state of anxiety and paranoia, and are prone to impulsive actions. In withdrawal, they are very irritable, irrational, and eventually can be comatose for extended periods, even days at a time. This point is illustrated by the case of one recovering meth addict, a mother, who said, "I only fed my children Top Ramen. That seemed to be sufficient to me."

In addition, because methamphetamine is known to enhance sexual contact, children are susceptible to sexual abuse as well. As a result, innocent children are frequently victims of hazardous contamination, unsanitary and unsafe living conditions, and abuse that require the intervention and removal by Child Protective Services.

One of the problems facing law enforcement when a lab operation is "busted" is how to deal with any children and other caregivers that may be present. Assuming the adult male is arrested who has a female accomplice with children, the police are hard pressed to arrest the female as well if there is not a ready alternative for the care of the children, e.g., a nearby relative. Where appropriate, the children will be turned over to Child Protective Services (CPS) but there is not always a desirable placement available, particularly in rural areas.

There is therefore a crucial need for social service resources to deal with the child care and family issues that arise from the arrest of a caregiver. Besides alternative custody or accountability of the other caregiver (usually, the mother) the children must be assessed as to need and appropriate placement and, if removed from the mother, placed accordingly. Beyond that, there often remains a requirement for the mother, who is more often than not, drug involved, and therefore in need of treatment services.

Treatment Needs

The highly addictive nature of methamphetamine, concurrent with its ready availability and low cost relative to other drugs, presents a real problem for already-stretched treatment resources in the community. While methamphetamine addiction is treatable, it has become clear that the treatment process must be more intensive for longer periods.

Meth users who seek or are remanded to treatment must often arrive at the door of the treatment provider with nothing – no job, no home, no family network or support system, and no money. They are in need of comprehensive resources that are often

beyond the average treatment needs. Additionally, because of the impact of methamphetamine on the brain, these people often suffer from mental health disorders and need mental health therapy in conjunction with their treatment.

Treatment is also key where caregivers of dependent children are dependent on meth, and their ability to recover from the addiction is essential before the family can be reunited with assurance that any children involved can be properly cared for.

Public Health

Another area of concern where methamphetamine is having an impact on public health is its apparent relationship to increased HIV transmission and other compromised public health outcomes. A study by the University of Washington (A. Pach, E.M. Gorman, and M. Agar) examined diverse populations of methamphetamine users in several Western US cities, including Seattle, where methamphetamine related deaths had tripled between 1991-1996. Its use is related to perceptions that it enhances sexual, social and occupational performance and is an entrenched and increasingly popular drug among a number of categories of users, including men having sex with men (MSM). By creating sexual disinhibition, the drug predisposes people to unsafe sexual practices as well as the sharing of drug paraphernalia.

Treatment providers also report a trend towards more and more persons injecting methamphetamine, dramatically expanding the population that is vulnerable to sexually transmitted and blood-borne infections, including syphilis, Hepatitis C and the HIV virus. Data from King County indicates that 47% of men who have sex with men and inject methamphetamine are infected with HIV.

Community

Often not readily visible is the impact of methamphetamine on communities. Neighborhoods that have become victimized by domestic meth production face negative economic and crime impacts. Labs are often the site of drug trafficking which subjects neighbors to loitering by undesirables, trash, and late night activities in addition to the hazards presented by the meth lab itself.

Neighborhoods where meth is manufactured can also suffer declines in property values. A homeowner in Northwest Tacoma reported that the home she had purchased for \$160,000 would not bring more than \$110,000 four years later, due to a home across the street that was seized as a meth lab and sat boarded-up. Spokane County, Washington, reported 70 such boarded up homes in 2005, all former meth labs.

III. Conception and Organization

Strategy Development

The growth in the production, distribution, and use of methamphetamine around the state had reached near-crisis proportions, overwhelming state and local capacities to deal with a problem that impacts the state's citizenry like no other drug had before. As individual disciplines, ranging from law enforcement to ecology, family services and community development, attempted to cope with the variety of impacts, the sheer numbers had forced them into a reactive mode, attempting to deal with an epidemic problem with already limited resources.

It was therefore essential that an aggressive and comprehensive, pro-active program be undertaken to attack the problem at its source and relieve the strain on the capacity of communities to respond to the manifold impacts of methamphetamine.

The law enforcement, treatment, and community professionals who met late in 1999 were fully aware of the need to draw in all the disciplines impacted by the meth epidemic and recruited professionals from those areas to help shape a strategy to address this multi-faceted problem.

A coalition was formed from the diverse disciplines of criminal justice, social and health services, and community-based systems, to initiate just such a pro-active approach. They proposed a "*Washington State Methamphetamine Initiative*", a focused, cross-state organization and multi-disciplined partnership that transcends governmental, private, and community based organizations in order to bring sufficient resources to bear on what could otherwise become an intractable problem.

The coalition brought together three disparate "discipline areas", i.e., criminal justice, social and health services, and community systems, to undertake a common goal, i.e., the abatement of the manufacture, distribution and use of methamphetamine in Washington State. Within each discipline area, a number of functional components were identified as key to the abatement program and which would serve as the focus for the expansion or enhancement of primary services.

The concept for the Washington State Methamphetamine Initiative (WSMI) was a comprehensive and integrated program that would undertake a multi-disciplinary effort entailing law enforcement, intelligence, forensics, professional training, environmental and health services, community mobilization and public education and prevention components. These components were to be coordinated with all concerned state and local agencies and governmental entities, as well as private, non-profit and commercial activities where appropriate.

The coalition also allied itself with the Governor's Methamphetamine Coordinating Committee, thereby gaining visibility and support from the highest level through which tasking authority could be gained throughout the key state offices involved.

Public Awareness

Although there had been press coverage as methamphetamine related incidents became more frequent in the state, most of the public, including governmental decision makers and lawmakers, lacked knowledge of the implications that methamphetamine presents society at many levels. Most citizens were unaware of the hazards they might confront in public places where chemicals may have been dumped or even illicit labs that may be located near their residence, work place, or areas of recreation. Besides the direct hazards these represent, the greater impacts are the social implications of criminal activity, child neglect, and related effects of drug use and trafficking in the community. Concurrent with those, of course, are criminal justice and social services resources that sooner or later impact the taxpaying citizen.

In order to mount an effective campaign against the methamphetamine problem, public awareness of the problem had to be increased to gain the necessary public backing for the legislature and local governments to make immediate and long-term resource commitments. The public must also be involved in the support of community mobilization efforts in concert with local, state, and federal agencies and activities.

In addition, professionals in all of the diverse disciplines that were affected, from criminal justice through social and health services, needed training and even certification in some cases, to deal with the manifold issues of methamphetamine. This mandated an extensive cross-disciplined training program coordinated across the state and between agencies. Similarly, training needed to be brought to retailers and wholesalers of precursor chemicals as well as to community leaders and the public at large. Hot lines, 1-800 numbers for information, and a website were needed to provide citizens ready access for useful information, referrals, and a means to inform authorities of possible methamphetamine production sites or distribution activities.

IV. Funding and Implementation

The initiative organizers agreed that, for the purposes of seeking funding, it was important to stress that the coalition would be seeking specially authorized, new federal funding so that no current program funding (e.g., Byrne Grant monies) would be usurped or diverted for the effort. It was, rather, the intention of the coalition that the initiative coalesce and augment existing programs and inter-agency efforts with the necessary resources to more comprehensively deal with the methamphetamine problem in Washington State.

The organizers were also careful to articulate goals and objectives that align with, and directly support, those of the Office of National Drug Control Policy (ONDCP) as well as those articulated at the 1998 federally-sponsored Arlington Conference on Methamphetamine.

In 2000, the leaders of the initiative met with the Washington State Congressional Delegation at one of the delegation's monthly breakfasts. There, they made a presentation on the methamphetamine problem, the proposed strategy of the initiative, and requested the assistance and support of the members of congress to secure a special congressional allocation to fund the initiative. The delegation was unanimous in endorsing the program and the initiative received particularly valuable support from Representative Brian Baird and Representative Norm Dicks.

Representative Baird took a special interest in the project because of methamphetamine problems in his district, which was transited by the I-5 corridor and supported the growing population centers of Vancouver, Washington as well as Portland, Oregon, just across the Columbia River. Representative Baird has since become a major spokesman in Congress for programs to combat methamphetamine throughout the United States, based on the efforts made by the Washington State Methamphetamine Initiative. He helped initiate the congressional methamphetamine caucus and served as its first co-chair.

Another key player was Washington Senator Slate Gorton, who lead the effort for the appropriation through the Senate's Commerce Justice State Committee. Even after leaving Congress in 2000, Senator Gorton continued to use his good offices to support the program and endorse continued funding in the follow-on years.

The Initiative organizers had originally hoped to garner \$15 million dollars from Congress for the first year of operations in order to undertake an ambitious state-wide program immediately. This envisioned a full-time staff to coordinate all the program activities, provide professional training and publicity across the state, and provide the related administrative support.

However, due to congressional funding constraints, only \$2 million was made available the first year and the Initiative organizers developed a much more modest plan to set up pilot programs in the counties of the state most affected. Five counties were designated for proactive law enforcement, six counties were to develop community coalitions, i.e., "Meth Action Teams", and one, Pierce County, would support a "Methamphetamine Family Services Program."

These would serve as demonstration projects to justify state and federal funding in the follow-on years as the project would be expanded into the other counties of the state.

V. Program Components

Approach

The essential aspect of the initiative was to take an proactive stance toward a very complex and demanding problem, instead of simply reacting to it in a piecemeal manner. The normal process would be for each of the various disciplines affected to justify new requirements independently, competing with the other areas for scarce funding. That approach would have also put the state into a de facto reactive mode, attempting to obtain ever more resources for the functional areas and jurisdictions as they ultimately had to face the problem, overwhelmed by a growing number of lab discoveries and dump sites.

Instead, the initiative provided a focused, in-depth, comprehensive, and pro-active approach to attack the problem at its source and deal with it across all disciplines. The initiative organizers believed that only by leap-frogging the situation with an extraordinary commitment of resources could they place the state on a footing to overcome the growing methamphetamine epidemic.

From a functional/organizational standpoint, the initiative organizers identified three systems areas to be addressed: the criminal justice system, the social and health services system, and the public/community system. While each of the systems had a different focus and approach in terms of addressing the methamphetamine problem, it was critically important that they must work together to share crucial information and to coordinate activities that had to work in a complementary manner.

Criminal Justice System

The focus of the criminal justice system was and is an aggressive approach towards the identification, location and seizure of any means of methamphetamine production or distribution and the arrest and prosecution of the perpetrators of these activities. Functional areas within the criminal justice system included intelligence, forensics, investigation and enforcement, and prosecution.

The coalition recognized that a proactive intelligence and investigation effort would escalate the number of clandestine laboratory discoveries as additional resources were applied. As investigations progress, more intelligence garnered, and methodologies enhanced, the number of such laboratories would be expected to continue to increase, particularly in the more rural counties where there is more hiding room and more limited law enforcement resources on a per- square-mile basis.

Thus, the short-term outcome for the first 2-3 years of the program would be a large increase in the number of clandestine lab discoveries. However, the anticipated longer term outcome would be a suppression of those numbers to a level that could be handled within the capacity of local law enforcement resources.

Social and Health Services System

The focus of the social and health services system was to respond to the effects of methamphetamine on the people and the environment, primarily with respect to rehabilitation or recovery from a negative state, i.e., a "therapeutic" focus that is, by necessity, reactive to the effects of the primary problem. These reactive systems entail ecology, public health, drug and alcohol treatment, and child and family services.

Outcomes anticipated from the social and health service system components included:

- Improved and expanded treatment resources specifically designed to deal with the addictive qualities of methamphetamine.
- Development of a protocol for the removal of children from the harmful threats of methamphetamine manufacturing and/or a situation of neglect or abuse.
- Reconciliation and rehabilitation of the family where a caregiver is charged with methamphetamine manufacture.
- A reduction of environmental and building contamination by methamphetamine precursor chemicals or byproducts.

Public/Community System

The focus of the community based systems was to involve the public in the resolution of the methamphetamine problem. Here, the intent was to energize the public will towards addressing the immediate problem as well as to propagate long-term efforts towards prevention and healing efforts through community resources. This encompassed a number of "public oriented" entities, to include community groups, residents, local governmental agencies, elected leaders, schools, business, churches, and the media. It was also important to engage the community in order to gain support for future public policy efforts for legislation to support funding future anti-methamphetamine activities such as restrictive measures on the sales of necessary chemicals and child endangerment laws.

Functional components within this area include professional training, community mobilization, and public and media relations. Initial efforts were focused on cross-training professionals within the criminal justice and social and health service systems on methamphetamine related subjects; organizing community action teams; educating the public on the dangers of methamphetamine to the community and the means to combat it; and working with the media to help educate the community as well as local and state lawmakers.

Organization.

The essential purpose of the coalition is to coalesce and coordinate the three major systems involved, toward the common goal of the abatement of methamphetamine manufacture, distribution, and use in Washington State.

The primary responsibility for oversight of the coalition's activities is vested in a steering committee composed of members representing each of the disciplines or interest involved with the initiative, listed below:

- Law Enforcement (Washington Association of Sheriffs and Police Chiefs)
- Prosecution
- Community Mobilization and Training
- Ecology
- Public Health
- Chemical Dependency Treatment/Family Counseling

The board advises the program director on the mission implementation of the coalition, priority setting, and resource allocation. Each component area has a designated person responsible for its implementation and the reporting of progress and results for the area as well as expenditures and resources applied. The board, in turn, reports to the Governor's Methamphetamine Coordinating Committee, which has oversight of all state resources involved with addressing the methamphetamine problem.

The initiative envisioned a "bare bones" oversight and administrative structure, aligning with the essential goal of the organization to abate and defeat the methamphetamine crisis to the level that an ongoing effort could be continued within the capacity of existing systems, albeit substantially improved by virtue of the initiative.

The members agreed that most administrative functions would be subsumed within existing organizations. For example, law enforcement personnel would be hired and trained by cooperating law enforcement agencies and assigned to the initiative effort full-time. This approach capitalizes on existing administrative infrastructures and expertise within a given functional area, while enhancing the overall capacity with specialty skills related to methamphetamine.

Essential administration and coordination of operations was undertaken by a half-time program director operating out of the office of the Washington State Patrol. The program director provides the day-to-day program supervision and administration necessary to carry out the operations as prescribed by the mission and the board. This person will ensure that funding allocations and priorities developed by the board are properly implemented and accounted for, to include output reporting (mission accomplishment). The director also maintains the memorandums of agreement that bind the various agencies to the mission statement of the coalition and recommend

changes as appropriate to the Board. In addition, this person coordinates board meetings and reports to the board regularly as to the program's expenditures and mission accomplishment with respect to the assigned priorities.

Fiduciary responsibility for the funds allocated to the initiative was assumed by the Pierce County Alliance, a private non-profit organization with extensive grant and funds accounting experience, and one of the organizing members of the initiative.

The Alliance performs the accounting function for the coalition, receiving all reports of expenditures by members and executing checks as directed by the Board of Directors.

PROGRAM ACTIVITIES

LAW ENFORCEMENT. The initiative has undertaken the proactive identification and interdiction of precursor and essential chemicals as a major priority in order to reduce the distribution of supplies that support the manufacture of methamphetamine. As a result, the predominate share of those funds allocated to the law enforcement component has been to fund precursor investigation detectives. This approach has proven effective in investigations to inhibit the production of methamphetamine by limiting access to selective chemicals and identifying persons of interest where their purchases fit a profile of methamphetamine production.

In 2005, the initiative, working in partnership with the Washington State Department of Health Pharmacy Board, implemented a newly enacted law, ESSB #6478 which became effective July 1, 2004. This collaborative legislation with State Legislators, pharmaceutical manufacturers and retailers, makes it increasingly difficult to divert precursor, over the counter drugs into illicit laboratories. Successes have already been realized with six major in-state ephedrine/pseudo-ephedrine wholesalers surrendering their DEA registration numbers and Board of Pharmacy licenses. These companies had distributed over 9,500,000 dosage units during a 250 day period in 2003 to retail outlets in Washington State. During the FFY 2005 grant period, law enforcement and the Board of Pharmacy will utilize this aggressive legislation to further impact the domestic manufacture of methamphetamine.

Funding allocated for law enforcement focused on the hiring and equipping of precursor detectives in selected counties to take a proactive approach to the sales and distribution of precursor and other chemicals essential to the manufacture of methamphetamine. Duties of these detectives include contacting, educating, and developing partnerships with retailers and wholesalers who sell legal over-the-counter materials that serve as precursor and essential chemicals for the manufacture of methamphetamine. The detectives work within local narcotics units or multi-agency narcotics task forces that have lab-certified personnel assigned to them. Each detective is supervised by the agency that signs a memorandum of understanding with the initiative.

INTELLIGENCE GATHERING. Through its collaborations, the initiative leverages intelligence gathering efforts of the DEA, HIDTA Northwest, the Washington State Patrol and local law enforcement through narcotics task forces. Through these interfaces, intelligence information is exchanged as necessary to support the anti-methamphetamine efforts.

PRODUCTION. As a result of increased intelligence, enforcement, public information, professional training, community mobilization, treatment intervention and environmental response, the initiative witnessed interruption of methamphetamine distribution and the abatement of rising levels of production.

The enhancement of the State Department of Ecology resources help to mitigate the negative and sometimes life threatening management of the hazardous waste associated with the clean up of methamphetamine lab sites.

CHILD ENDANGERMENT. To respond to this important area, the initiative members collaborated to develop a child endangerment protocol, "We CARE", which can be tailored for each community to organize an effective response to the immediate needs of methamphetamine-endangered children. It provides for coordination between law enforcement, the state's child protective services, local prosecution, and social service providers including the drug treatment and medical communities. {See page 19 for more details on the protocol and its implementation.}

TREATMENT. A model treatment program, the "Methamphetamine Family Services Treatment Court", operates in three "methamphetamine priority" counties in the state, Pierce, Spokane, and Thurston. Over the last year, some 500 families have received services through the three courts, with a successful graduation rate exceeding 60%. Most importantly, these courts have demonstrated a significantly improved ability to get meth-impacted children into permanent placements in a much more timely manner, in many cases, reunited with their caregivers.

The Methamphetamine Action Teams work closely with local treatment providers to expedite assessment and access to treatment for those persons identified as using methamphetamine, with priority to those who are caregivers of small children.

PREVENTION. The "Community Systems" component of the initiative provides education to the public, political leaders, and professionals involved impacted by the methamphetamine problem. The "Community Mobilization" element of the initiative implemented an award-winning model of private/community/governmental cooperation to deal with drug-related crime in a comprehensive community mobilization program. That program, the "Safe Streets Campaign", continues to play a crucial role in providing training, technical assistance and motivation to other communities to support the development of county methamphetamine action teams (described more fully on page 20).

PARTNERSHIP DEVELOPMENT. The development of partnerships at the local level constitutes the primary basis for the concept of the Washington State Methamphetamine Initiative and is the key to the sustainability of all of the component programs. The heart of these partnerships are the county methamphetamine action teams described earlier. These action teams are co-convened by the county sheriff and the county community mobilization coordinator. The action teams bring together community members with law enforcement, treatment services, business, social services, education, prosecution, youth and government. They serve as the nexus for local action that has resulted in local and state public policy for more effective enforcement and increased advocacy for communities and children victimized by methamphetamine. Therefore, the initiative will continue to keep partnership development central to its strategy for effective implementation of its programs.

In partnership with the real estate industry, the community partners advanced the education of landlords and real estate agents, and expanded the existing "Crime Free Multi-Family Housing" curriculum, even offering continuing education credits to real estate agents. Local Meth Action Teams provide community education on treatment strategies for meth addicts through community-wide summits. Working through local county superior courts and community-based social service organizations, the MATs also help to encourage the expansion of drug treatment courts across the state, particularly family treatment courts to deal with methamphetamine-related issues.

Social and Health Services

Environmental Team. The department of ecology and health respond to contaminated sites through direct coordination with the law enforcement teams, with the additional resources provided under the initiative's funding. The department of ecology is responsible for gross decontamination of a site, consisting primarily of removing all materials stored in containers and any manufacturing equipment. They transport and dispose of these materials after the site has been thoroughly investigated. A concurrent task is the removal of pressurized vessels, ranging from propane to scuba tanks, which have to be ventilated at an approved site.

The decontamination specialists from the Department of Health are responsible for determining if the facility is habitable and posting it accordingly. They also conduct follow-on clean up of the facility if required to remove contaminants from the interior.

The teams are organized to respond on an area basis to sites identified by the law enforcement team.

Family Services. A greatly expanded family services component provides for the on-site coordination with social services authorities where children or families are involved in a methamphetamine lab seizure. The teams coordinate through a designated social service coordinator who makes any necessary arrangements with local authorities and providers for shelter, medical, or other services and begin the process for review of the children's care and custody. The intention is to provide comprehensive and intensive, wrap-around services that can effectively deal with the complex problems of families impacted by methamphetamine. Such services may entail medical help, mental health therapy, chemical dependency treatment services, transitional shelter, resolution of dependency issues, foster care, and other ancillary and supportive efforts.

Pierce County provided the start-up model for a methamphetamine family services component based on successful approaches demonstrated in California as well as in Washington State where comprehensive family services have been implemented with good success. The Pierce County Alliance, a non-profit treatment provider, had a long history working with families of at-risk youth and provided chemical dependency treatment for adults and youth for over 25 years. The model provides for direct linkages with State Children and Family Services and Child Protection Services offices to ensure dependency and custody issues are properly handled.

The model also incorporate the latest, proven approaches for chemical dependency treatment for methamphetamine. For example, the MATRIX model developed by Dr. Richard Rawson of the Center for Substance Abuse Treatment includes relapse prevention, motivational interviewing, psycho-therapy education, and family therapy as adjuncts to the traditional 12-step methodology. It also provides for the use of antidepressants and a "go-slow" approach that recognizes the patient's diminished short-term memory skills due to methamphetamine use.

Using Pierce County as a prime proving ground, based on the dual aspect of its large incidence of methamphetamine use and the Alliance's particular background and experience, a prototype family treatment model for methamphetamine was implemented in the first year of the initiative, forming the basis for the other regions to emulate.

Protocol for Drug Endangered Children – “We Care”, a national model.

The most frequent child endangerment issue in meth lab homes is simply extreme, prolonged neglect that causes children – especially very small children – to shut down emotionally, failing to develop the attachments, expressive abilities, and emotional capacities that other children do.

CPS workers who remove children from these homes report that sometimes the children don't cry or express any feelings at all about their separation from their parents. They may, however, be heartbroken when they are not allowed to take any toys, blankets, teddy bear, or other prize possessions because of contamination. Even washing them is possible, because contaminated water can't be released into a septic tank or city sewer.

In past years, when home-based meth labs were seized by law enforcement, officers were faced with the problem of how to deal with children found in the homes. Often, they simply turned the kids over to neighbors or relatives.

However, that has changed dramatically with the implementation of the Washington State “We Care” Matrix, a protocol to protect children that was developed by members of the Washington State Methamphetamine Initiative. The matrix has since become a national model with several other states working to create a similar process to care for meth-affected children. {For more information, visit the Department of Health website at <http://www.doh.wa.gov/ehp/ts/CDL/we-care.pdf> }

The We Care model is designed to help those who work on behalf of drug endangered children to maximize resources and provide these children the best care possible in the most traumatic circumstances.

The procedures ensure that when law enforcement officers make a lab seizure and children are present, that they contact Child Protective Services (CPS) immediately. CPS then works with law enforcement to arrange for the immediate care of the children, including testing for contamination, cleanup, and assessments of the child's needs. Both CPS workers and law enforcement personnel are specially trained and equipped to gently wipe children's hands and faces, provide clean clothes if needed, and to transport children to a receiving home.

At the home, CPS workers bathe the child and conduct an assessment for any medical treatment or other special needs. A urine sample is collected to determine how much meth or other chemicals may have been ingested by the child. CPS workers also find out if there were other children involved who were not at home when the lab seizure to place and follow up to ensure these children are safe and appropriately cared for.

By the protocol, CPS workers, doctors, and law enforcement personnel forward all related information to the local prosecutor's office so that those who endanger children

can be held accountable. In fact, one of the coalition's legislative successes was the enactment of laws that provide for an enhanced sentence for methamphetamine manufacturing where children are present (RCW 9.94A.605). {See the website at www.leg.wa.gov for more information on this and related laws.}

Regional training sessions are conducted around the state to assist the local meth action teams (MATs) to develop action plans for implementation of the "We CARE" protocol. The organization and operations of the MATs are discussed more fully under "Community Mobilization" on the following page.

Community Systems

As previously indicated, an essential component of the initiative is the education of the public, political leaders, and professionals who are or will become involved with the far-reaching impacts of methamphetamine. It was crucial that the public not only be made aware of its hazards, but are sufficiently concerned to support extraordinary measures to address the problem, ranging from community mobilization and activism to the allocation of taxpayer dollars for the measures necessary to attack the problem.

Professionals require training across a spectrum of disciplines, from chemical dependency and family issues to environmental hazards to the threat of dealing with armed and paranoid methamphetamine users. Public safety professionals, including law enforcement and fire safety officers must be certified through training on the hazards of clandestine labs, how to recognize and deal with those hazards, use of protective equipment and decontamination procedures, and preservation of evidence.

Community Mobilization.

Washington State was fortunate to have a award-winning model of private-community-governmental cooperation to deal with drug related crime in a comprehensive community mobilization program. That program, "Safe Streets", played a crucial role in providing training and motivation to communities across that state that lacked the experience and insight in dealing with those kinds of issues.

The basic approach undertaken was an extensive train-the-trainer program, so expertise gained in Tacoma and Pierce County was extended across the state, and adapted for local needs through the efforts of the initiatives Technical Assistance Team, culminating with the organization of "Meth Action Teams" in each county.

Under the auspices of the Safe Streets program, and working with resources from HIDTA and the state, education packages were created to train a cross section of community members about methamphetamine production, effects, and strategies to curtail its production and use. Kits included materials ready for local reproduction,

videos for local education, organizing packages for local communities, suggested best practices for collaboration and promising practices for prevention and intervention.

By 2003, Meth Action Teams were functioning in all 39 counties of the state, involving nearly 6,000 persons. Today the Meth Action Teams across the state speak with a single voice. They have real power – to get new legislation passed, attract federal funding and start drug court and treatment programs. They have changed many lives and created healthier communities in the process.

The Meth Actions teams host summit meetings, undertake community awareness campaigns, sponsor speakers at service club meetings, create youth and anti-drug education activities, and create such publicity items as paper placements for local restaurants with information about the dangers of meth.

It was through the concerted efforts of the Meth Initiative and the Meth Action Teams that an important new law was passed in 2004 to require identification and tracking of purchases of wholesale chemicals that can be used in manufacturing meth. In 2005, additional legislation was passed at the behest of the coalition to restrict the sale of over-the-counter medicines that contain ephedrine or pseudoephedrine because these are the main source for the extraction of methamphetamine (RCW 69.43.105).

The Meth Action Teams have essentially become the heart and soul of the Washington State Methamphetamine Initiative, providing the education, incentive, and leadership to coalesce communities in the fight to abate and eliminate the threat of methamphetamine. The key is to get everyone involved, particularly gaining the participation of key groups to mount an effective, community-wide prevention and eradication campaign.

Businesses that sell products used in the manufacture of meth must be made aware of the items that are in demand by illicit cooks as well as current laws that may restrict the sale of these items. Retailers and pharmacies who sell cold remedies need to understand the legal restrictions on purchasers of these items, to include how they are displayed and limits on quantities to an individual customer. In addition, purveyors of agricultural chemicals need to be able to identify and report suspicious purchases, and comply with laws that require identification and documentation for the purchase of certain products. Businesses also need to be aware of the signs of meth use so they can be vigilant about the use of meth their own employees before they escalate into theft, fraud and other crimes.

Landlords need to be aware of the hazards of renting to meth users and meth cooks, and to be well-informed about the signs of meth abuse and manufacture. To protect their investments – and to be good neighbors – landlords need to understand the importance of checking on rental properties frequently and screening tenants carefully.

Community Training Sessions

A series of train-the-trainer sessions conducted by a team of experts from law enforcement, health, ecology, treatment and prevention were presented to communities across the state. In addition, trainers make presentations to community groups to support local awareness and education efforts. The projected impact is to mobilize 10% of the state's population (50,000) people, creating a foundation for a critical mass that can impact the situation state-wide.

Core trainers update local communities with technical assistance after a community begins its mobilization process. A process for identifying local technical assistance needs and for brokering necessary services into local communities has been developed and takes place through a series of information bulletins provided through fax, mail, CD-ROM and email.

The program also established a 1-800 information hotline so citizens could be linked with local mobilization resources or to identify problem areas to law enforcement authorities. In addition, the coalition partnered with a website already operated by the office of the Lieutenant Governor to provide ready access to information about methamphetamine, production, effects of its use, hazards, and how to organize efforts to combat it, Q&A, technical assistance referrals, and links to other related sites.

PROGRAM ACCOMPLISHMENTS

Over its five years of operation, the initiative has helped deter crime through the following:

- a. More effective communication among participating law enforcement agencies.
- b. Increased face-to-face contact between law enforcement and the business community.
- c. Improved methods to provide on-site coordination of services and assistance to children present at lab seizures.
- d. Improved law enforcement and professional training regarding methamphetamine-related issues.
- e. Improved public awareness and training regarding methamphetamine issues.
- f. More effective communication among initiative members and their respective jurisdictions.
- g. The development of partnerships and coordination across key disciplines to address methamphetamine issues much more comprehensively, i.e., via the integration of treatment and prevention efforts with criminal justice components.
- h. Establishment of cross-functional teams at the local level to address methamphetamine issues.

RELATED INFORMATION SOURCES

The National Methamphetamine Training and Technical Assistance Center (NMTTAC)

Recently, the U.S. Department of Justice Office of Community Oriented Policing Services (www.cops.usdoj.gov) funded the National Methamphetamine Training and Technical Assistance Center (NMTTAC) to stimulate national advancement in community policing strategies which reduce the manufacture, distribution and use of methamphetamine.

Through a partnership of the Pierce County Alliance and the Safe Streets Campaign, a comprehensive and cutting-edge training and technical assistance center has been launched to serve the community collaborators of law enforcement, prevention and treatment entities. The NMTTAC will meet the needs of concerned local and state agencies and strategic stakeholders through the implementation of focus groups, the development of training curricula, the provision of national and local training, the availability of online training certification, content development for the www.methpedia.org website, and the analysis of best practices at the local and state level across the nation.

Additional methamphetamine information resources are available through the website <http://www.methresources.gov/> sponsored by the White House Office of National Drug Control Policy, the Department of Justice and the Department of Health and Human Services.